

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		4/3	6/13/01
FORMALITY REVIEW	101	1019	07-27-01
RESPONSE FORMALITY REVIEW	NH	617	10-18-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 □ Allowed I Interference
 (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	5/19/03
2	5/21/03
3	6/10/04
4	8/27/04
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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